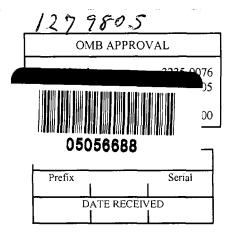
# FORM D

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# FORM D

PROCESSED
JUN 0 7 2005
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NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION



Name of Offering ( check if this is an amendment and name has changed, and indicate changed Oak Hill Credit Alpha Fund, L.P. offering of partnership interests	ge.)		
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☐ Rule 505 ☐ Rupe of Filing: ☐ New Filing ☐ Amendment	ale 506 Section 4(6) ULOE		
A. BASIC IDENTIFICATION DATA			
Enter the information requested about the issuer			
Name of Issuer ( check if this is an amendment and name has changed, and indicate changed Oak Hill Credit Alpha Fund, L.P.	ge.)		
Address of Executive Offices (Number and Street, City, State, Zip Code) 201 Main Street, Suite 1910, Fort Worth, Texas 76102	elephone Number (Including Area Code) 17-339-7348		
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)		
Brief Description of Business Hedge Fund			
Type of Business Organization  ☐ corporation ☐ business trust ☐ limited partnership, to be formed	other (please specify):		
Actual or Estimated Date of Incorporation or Organization:    Month   Year	· · · · · · · · · · · · · · · · · · ·		
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation  CN for Canada: FN for other foreign jurisdiction	7 10		

## **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### States

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6-02)

#### A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: □ Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Oak Hill Credit Alpha GenPar, L.P. (Number and Street, City, State, Zip Code) Business or Residence Address 201 Main Street, Suite 1910, Fort Worth, Texas 76102 Check Box(es) that Apply: □ Promoter Beneficial Owner ☐ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Oak Hill Credit Alpha MGP, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 201 Main Street, Suite 1910, Fort Worth, Texas 76102 Check Box(es) that Apply: □ Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) August, Glenn R. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Oak Hill Advisors, L.P., 65 East 55th Street, 32nd Floor, New York, New York 10022 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Bohnsack, Jr., William H. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Oak Hill Advisors, L.P., 65 East 55th Street, 32nd Floor, New York, New York 10022 Check Box(es) that Apply: Promoter Beneficial Owner ☐ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Krase, Scott D. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Oak Hill Advisors, L.P., 65 East 55th Street, 32nd Floor, New York, New York 10022 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

(Number and Street, City, State, Zip Code)

Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address

1.00 Sept 186	Carry of the contraction	Sec. For		B.	INFORM	ATION AB	OUT OFFE	RING		inger			ng Mengapa
1. Has t	he issuer sol		he issuer inte swer also in					fering?				Yes	No ⊠
2. What	t is the minir	num investr	nent that wil	l be accepte	d from any	individual?						\$ <u>2,000,</u>	000
						(whi	ich the Gene	ral Partner r	nay waive ir	n its sole discre	etion)		
	•	•										Yes	No
3. Does	the offering	permit join	t ownership	of a single	unit?	••••		.,				$\boxtimes$	
remu perso than dealo	uneration for on or agent of five (5) pers er only.	solicitation of a broker o sons to be lis	of purchase r dealer regi sted are asso	rs in connec stered with t	tion with sal the SEC and	es of securit /or with a sta	ies in the off ate or states,	ering. If a pe	erson to be li e of the brok	mmission or si sted is an assoo er or dealer. If on for that brol	ciated more		
	ne (Last nam	e first, if in	dividual)										
N/A	p :1	111	N. 1	1.64 . 674	Ct + 7:	0.1)							
Business	or Residence	e Address (	Number and	Street, City	, State, Zip	Code)							
Name of	Associated	Broker or D	ealer										
	Which Pers ck "All State											All	States
(AL) [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	(ID [M <sup>i</sup> [PA]	[0] [0]
Full Nan	ne (Last nam	ne first, if in	dividual)										
Business	s of Residence	ce Address (	Number and	l Street, City	y, State, Zip	Code)					<u> </u>		
Name of	Associated	Broker or D	ealer				<u></u>						
States in	Which Pers												States
	(Check	An States	of check file	ividual Stat	cs)		******************		***************************************	***************************************	•••••		States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	(ID [M [P <i>A</i> [PF	O] \]
Full Nan	ne (Last nam	ne first, if in	dividual)										
Business	s of Residence	ce Address (	Number and	l Street, Cit	y, State, Zip	Code)							
Name of	Associated	Broker or D	Dealer										
States in	Which Pers (Check "		as Solicited or check ind									☐ All	States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID [M [P <i>F</i>	O] N]

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt <sup>*</sup>	\$N/A	\$N/A
	Equity	s N/A	\$ N/A
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)		
	Partnership Interests	\$N/A	_ \$N/A
	·	\$ <u>unlimited</u>	\$ 125,090,000
	Other (Specify)	\$N/A	\$N/A
	Total	\$ <u>unlimited</u>	\$\$_090,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	42	\$ 125,090,000
	Non-accredited Investors	0	0
	Total (for filings under Rule 504 only)		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.	Turn of	Dellas Assault
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505	N/A	\$\$
	Regulation A	N/A	\$N/A
	Rule 504	N/A	\$ N/A
	Total	N/A	\$ N/A
		17/4	Ψ
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	$\boxtimes$	\$0
	Printing and Engraving Costs	$\boxtimes$	\$0
	Legal Fees	$\boxtimes$	\$81,600
	Accounting Fees	$\boxtimes$	\$0
	Engineering Fees	$\boxtimes$	\$0
	Sales Commissions (specify finders' fees separately)	$\boxtimes$	\$0
	Other Expenses (identify	$\boxtimes$	\$21,800
	Total	$\boxtimes$	\$103,400

	ne of Signer (Print or Type) nn R. August	Title of Signer (Print'or Type)  Managing Member of Oak Hill Credit Alpha MG	P, LLC, the Ultimate G	General Partner
Oal	er (Print or Type)  K Hill Credit Alpha Fund, L.P.  me of Signer (Print or Type)	Signature  Title of Signer (Print or Type)	Date May 31, 2005	
sigr info	ature constitutes an undertaking by the i rmation furnished by the issuer to any no	signed by the undersigned duly authorized person. If this not ssuer to furnish to the U.S. Securities and Exchange Commis on-accredited investor pursuant to paragraph (b)(2) of Rule 5	sion, upon written reque	
		D. FEDERAL SIGNATURE		
	Total Payments Listed (column totals	s added)	⊠ <u>\$1</u>	24,986,600
	Column Totals		☐ \$	<b>⊠</b> \$ <u>124,986,600</u>
			□ s	\$
	Other (specify):			
	Working capital	□ \$	<b>∑</b> \$ <u>124,986,600</u>	
	Repayment of indebtedness	<b>S</b>	\$	
	Acquisition of other businesses (inclumay be used in exchange for the asse	s	•	
	Construction or leasing of plant build	<b>\$</b>		
	Purchase, rental or leasing and instal	<b>S</b>		
	Purchase of real estate		□ s	
	Salaries and fees		<b>\$</b>	<b>S</b>
	gross proceeds to the issuer set forth	in response to Part C — Question 4.b above.	Payments to Officers, Directors, & Affiliates	Payments to Others
5.	each of the purposes shown. If the a	sted gross proceeds to the issuer used or proposed to be used fo amount for any purpose is not known, furnish an estimate and nate. The total of the payments listed must equal the adjuste	d	
	Question 1 and total expenses furnish	the aggregate offering price given in response to Part C ed in response to Part C — Question 4.a. This difference is th		\$124,986,600

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)